

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	<i>Y. A. 12</i>		<i>6-7-13-01</i>
O.I.P.E. CLASSIFIER		<i>8</i>	<i>7-22-01</i>
FORMALITY REVIEW	<i>ny</i>	<i>1122</i>	<i>08-27-01</i>
RESPONSE FORMALITY REVIEW	<i>(CJ)</i>	<i>825</i>	<i>12/12/01</i>

### INDEX OF CLAIMS

✓ ..... Rejected      N ..... Non-elected  
 = ..... Allowed      I ..... Interference  
 - (Through numeral)... Canceled      A ..... Appeal  
 + ..... Restricted      O ..... Objected

BEST AVAILABLE COPY

Claim	Date
Final	
Original	
1	<i>6/7/02</i>
2	<i>11/12/03</i>
3	<i>19/11/03</i>
4	<i>3/3/04</i>
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Claim	Date
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If more than 150 claims or 10 actions  
staple additional sheet here

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*50553ML*  
*8/28/01*  
*RCB-7053*  
*12/18/01*